



RECEIVED

TOWNSHIP OF LACEY

OPEN PUBLIC RECORDS ACT REQUEST FORM

818 West Lacey Road, Forked River, NJ 08731

1-609-693-1100, ext. 2200 / Fax: 1-609-693-0526

laceyclerk@laceytownship.org

Veronica Laureigh - Municipal Clerk

LOG#

597

Date Due:

11-2

LACEY TOWNSHIP
MUNICIPAL CLERK

Important Notice

The last page of this form contains important information related to your rights concerning government records. Please read it carefully.

Requestor Information - Please Print

First Name Karen MI D Last Name Monus
E-mail Address monus@comcast.net
Mailing Address 476 Commodore Drive
City Forked River State NJ Zip 08731
Telephone 609-276-2137 FAX _____
Preferred Delivery: Pick Up _____ US Mail _____ On-Site Inspect _____ Fax _____ E-mail ☒
If you are requesting records containing personal information, please circle one: Under penalty of N.J.S.A. 2C:28-3, I certify that I HAVE ~~HAVE NOT~~ been convicted of any indictable offense under the laws of New Jersey, any other state, or the United States.
Signature Karen Monus Date Aug. 27, 2018

Payment Information

Maximum Authorization Cost \$

Select Payment Method

Cash Check Money Order

Fees: Letter size pages - \$0.05 per page
Legal size pages - \$0.07 per page
Other materials (CD, DVD etc) - actual cost of material
Delivery: Delivery / postage fees additional depending upon delivery type.

Extras: Special service charge dependent upon request.

Record Request Information: Please be as specific as possible in describing the records being requested. Also, please note that your preferred method of delivery will only be accommodated if the custodian has the technological means and the integrity of the records will not be jeopardized by such method of delivery.

Copy of ~~the~~ Permit submitted for fence @
478 Commodore Dr Forked River, NJ
I found it to be over my property line.
6 FT Stockade Fence from Front to Rear
against my side of my property. Bldg
226.03 11

AGENCY USE ONLY

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Est. Document Cost _____
Est. Delivery Cost _____
Est. Extras Cost _____
Total Est. Cost _____
Deposit Amount _____
Estimated Balance _____
Deposit Date _____

Disposition Notes
Custodian: If any part of request cannot be delivered in seven business days, detail reasons here.

In Progress	-	Open	_____
Denied	-	Closed	_____
Filled	-	Closed	_____
Partial	-	Closed	_____

Tracking Information		Final Cost	
Tracking #	_____	Total	_____
Rec'd Date	_____	Deposit	_____
Ready Date	_____	Balance Due	_____
Total Pages	_____	Balance Paid	_____

Records Provided

NO PERMIT FOR FENCE
BUILDING OR ZONING
10/30/18 JC

Custodian Signature _____ Date _____